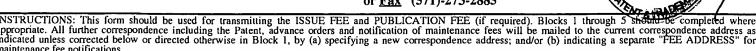
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885



NSTRUCTIONS: This ppropriate. All further adicated unless correct anintenance fee notifica	correspondence including ed below or directed other	for transmitting the ISSU og the Patent, advance of herwise in Block 1, by (UE FEE and PUBLICATI rders and notification of n a) specifying a new corres	ON FEE (if requinaintenance fees we pondence address;	ired). Block vill be maile and/or (b)	s 1 through 5 st ed to the current indicating a sepa	Suid-be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
	7590 10/21 NDERHYE, PC LEBE ROAD, 11TH VA 22203		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
						(Depositor's name)	
		ļ. <u>.</u>				(Signature)	
							(Date)
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/586,132 ITLE OF INVENTION	11/28/2006 : BIOCHEMICAL SYN	Pet THESIS OF 6-AMINO	ronella C. Raemakers-Fran CAPROIC ACID	ken 01/69/	GRT/ 2009 AWON	4662-216 DAF2 00000064	3817 10586132
				01 FC: 02 FC: 03 FC:	1504		1510.00 OP 300.00 OP 15.00 OD
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	01/21/2009
EXAMINER ART UNIT			CLASS-SUBCLASS				
MEAH, MOHAMMAD Y 1652			435-128000				
FR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind	ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address or more recent) attach	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
DSM IP ASSETS B.V. Heerlen, The Netherlands							
lease check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government							
a. The following fee(s). Issue Fee Publication Fee (N Advance Order - a	Io small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number					
	tus (from status indicate s SMALL ENTITY state		b. Applicant is no long	- ', ', ',			
OTE: The Issue Fee an iterest as shown by the	d Publication Fee (if req	uired) will not be accepte ites Patent and Trademark	ed from anyone other than the Office.	he applicant; a regi	stered attorr	ney or agent; or th	e assignee or other party in
Authorized Signature		3		DateJ	anuary	8, 2009	
Typed or printed name				Registration N		43,180	
his collection of inform n application. Confiden ubmitting the completed his form and/or suggestions. Alexandra V	ation is required by 37 (tiality is governed by 35 d application form to the construction for this but the construction at 2313,1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OF	on is required to obtain or r 1.14. This collection is est y depending upon the indiving the Chief Information Office COMPLETED EOPING TO	retain a benefit by the imated to take 12 in imated to take 12 in indual case. Any coer, U.S. Patent and D. THIS ADDRESS	he public whinutes to comments on Trademark	hich is to file (and omplete, includin the amount of tin Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rement of Commerce, P.O.

This collection of information is re an application. Confidentiality is g submitting the completed applicati this form and/or suggestions for re Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450. EES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.